

No. W 124675		Due no later than Apr 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. HOLMAN, LLC CHERYLYN R HOLMAN 496-B SHOUP AVE WEST TWIN FALLS ID 83301-5043 USA		CRAIG D HOLMAN 496-B SHOUP AVE WEST TWIN FALLS ID 83301-5043			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CHERYLYN R HOLMAN	496-B SHOUP AVE WEST	TWIN FALLS	ID	USA	83301-5043	
5. Organized Under the Laws of: ID W 124675		6. Annual Report must be signed.* Signature: Craig D Holman Name (type or print): Craig D Holman					
		Date: 02/12/2014 Title: Registered Agent					
Processed 02/12/2014		* Electronically provided signatures are accepted as original signatures.					